

HB1038 Telehealth Update

North Dakota Health Information Network

SHP Update on Telehealth

March 21, 2016

Our discussion today...

- Overview of HB1038
- Legislative process and timeline
- Eligibility
- Covered Services
- Coding & Reimbursement
- Summary of paid claims data
- Q&As

HB1038

- Require the coverage of telemedicine for NDPERS
- Amendments adopted include:
 - adding definitions for “distant site” and “originating site”
 - reimbursements may be established through negotiations
 - In addition, a provision was struck that would prohibit special cost-sharing for services provided through telemedicine.

HB1038

- Services still subject to medical necessity
- Services subject to normal deductible, coinsurance and copayment amounts
- The bill will expire June 30, 2017 unless the expiration is reversed as a result of recommendations of a study.

Legislative Process and Timeline

- Oct. 2015 – PERS develops study outline
- March 2016 – PERS submits bill draft to the Employee Benefits Committee
- Aug/Sept 2016 – Report is submitted to Employee Benefits Committee

Facility Eligibility

We follow CMS eligibility standards for facilities:

- Practitioner Office
- Hospital (inpatient or outpatient)
- Critical Access Hospital (CAH)
- Rural Health Clinic (RHC)
- Federally Qualified Health Center (FQHC)
- Dialysis Centers (hospital or CAH-based)
- Skilled Nursing Facility
- Community Mental Health Center

Practitioner Eligibility

We follow CMS eligibility standards for practitioners:

- Physician
- Nurse practitioner
- Physician assistant
- Nurse-midwife
- Clinical nurse specialist
- Clinical psychologist
- Clinical social worker
- Registered dietitian or nutrition professional

Covered Services

- Services must be medically necessary and appropriate
- Evaluation, management and consultation services
 - Synchronous – interactive audio/video visit
 - Asynchronous - store-and-forward evaluation
- Telemonitoring – monitoring patients at a distance who are at risk for an acute episode
 - Cardiac conditions, COPD, diabetes, mental health/substance abuse

Examples of Covered Services

- Office or outpatient visits
- Consultations (office, Internet-based, outpatient, emergency room)
- Follow-up inpatient consultations
- Pharmacologic management
- Neurobehavioral status exam
- Individual and group medical nutrition therapy
- Individual and group health and behavior assessment and intervention

Minimum Requirements

- Services must be medically necessary and appropriate
- A permanent record of telemedicine communication must be maintained as part of patient medical record
- Provider must receive appropriate informed patient consent for telemedicine
- Services must be under control of consulting practitioner

Non-Covered Services

- Non-HIPAA compliance communication
- Transmission fees, per-minute – reported by HCPCS procedure code T1014.
- Services for diagnoses excluded by a Member's Benefit Policy
- Services not medically appropriate or necessary.
- Installation or maintenance of any telecommunication devices or systems
- Provider-initiated e-mail

Non-Covered Services

- Appointment scheduling
- A service that would similarly not be charged for in a regular office visit
- Reminders of scheduled office visits
- Requests for a referral
- Consultative message exchanges with an individual who is seen in the provider's office immediately afterward
- Clarification of simple instructions

Coding & Reimbursement

Coding

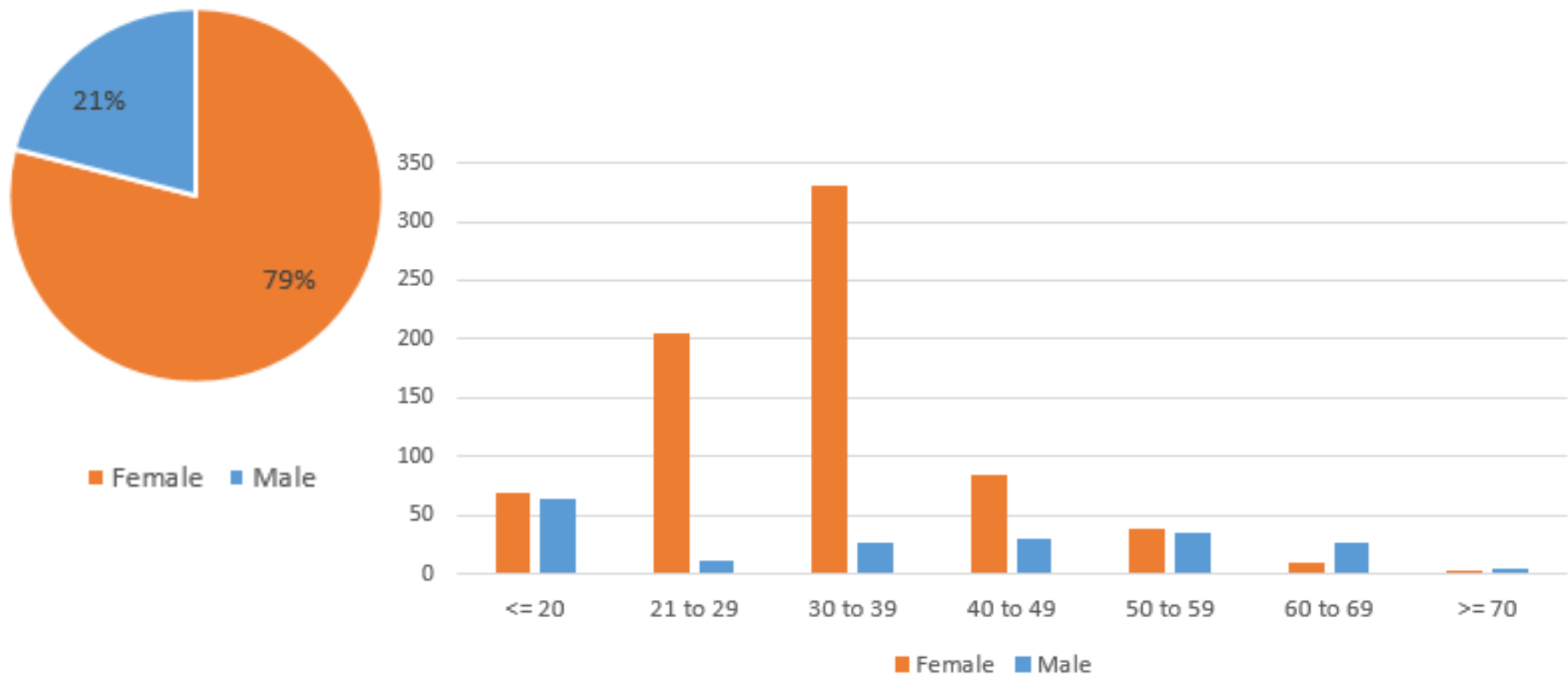
- Billable CPT codes will be provided on website and within Provider Manual
- Must use modifiers:
 - GT – live video encounters
 - GQ – store-and-forward encounters
- Reimbursement is according to your current negotiated professional agreement rates

Summary of Paid Claims

- 938 total telehealth claims incurred between 7/1/15 and 1/31/16, paid through 3/1/16
- 551 are professional claims refer to the professional service
- 387 are originating site claims as identified by the Q3014 code

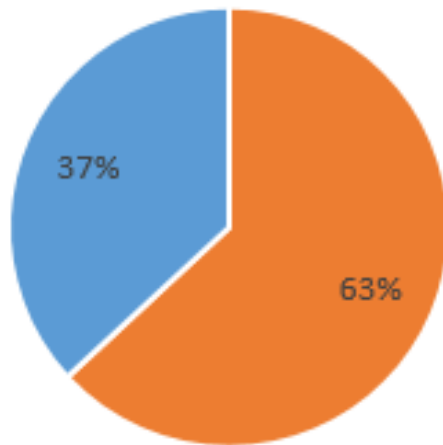
Summary of Paid Claims

Telehealth Claims by Gender and Age Bands

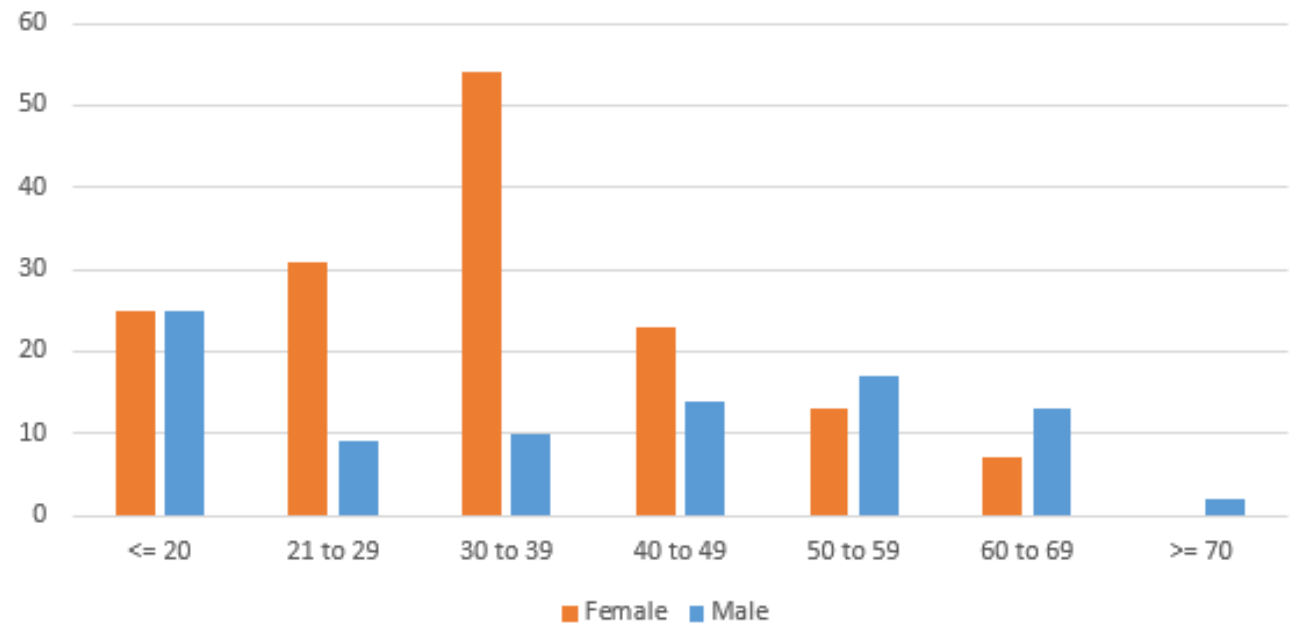


Summary of Paid Claims

Total Telehealth Members by Gender and Age



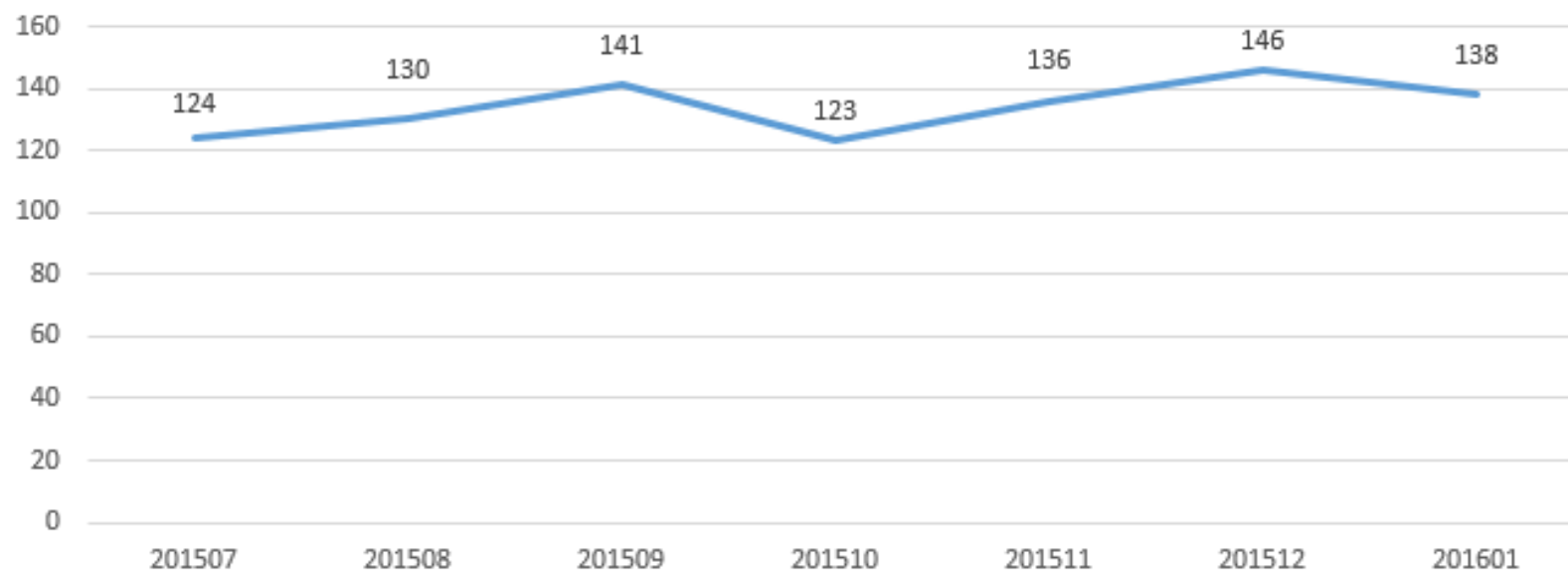
Female Male



Summary of Paid Claims

Claims over Time

July 2015 to Jan 2016



Summary of Paid Claims

- 82.6% of the telehealth claims were between a provider and a member (resident) both in the state of North Dakota
- 7.4% of the telehealth claims were between a ND resident and a MN provider.

Provider State	Member State			Grand Total
	MN	ND	SD	
ND	5	455	0	460
MN	5	41	0	46
MT	0	14	0	14
SD	2	10	1	13
IL	0	11	0	11
NE	0	6	0	6
ID	0	1	0	1
Grand Total	12	538	1	551

Summary of Paid Claims

- Member State/City v Provider/State/City Dakota

Provider State/City	Member State/City															SD	Grand Total
	MAN	NO	BEAUMONT	DICKINSON	GRAND FORKS	JAMESTOWN	MINOT	WILLISTON	Small Towns	CAVALIER	DEVILS LAKE	KELLOGG	LINCOLN	ROCKLAKE	VALLEY CITY	YORK	
ID		1															1
IL					5				5								10
MI	5			3	2	3			15						3		40
MT								11	2								14
ND																	
BEAUMONT		3	1				2	8	8								20
DICKINSON			2						1								3
FARGO	1	41	33	84	21	10	8	49			1	33	11		1	12	209
GRAND FORKS	3	21		7					40	13	23			13			120
JAMESTOWN						3											3
MINOT						3	10	8	7								28
WILLISTON				4				3									8
MT							5										5
ND	1	2				3			6						1		10
Grand Total	12	68	40	95	30	23	23	61	104	26	27	33	22	13	2	12	561

Summary of Paid Claims

- Top 10 Provider Specialties represent 86% of total claim

Provider Specialty	Claims
REPRODUCTIVE ENDOCRINOLOGY (OBSTETRICS & GYNECOLOGY)	204
PSYCHIATRY (PSYCHIATRY & NEUROLOGY)	83
CHILD & ADOLESCENT PSYCHIATRY (PSYCHIATRY & NEUROLOGY)	36
PSYCHOLOGIST	44
NP - OBSTETRICS & GYNECOLOGY	30
SLEEP MEDICINE (FAMILY MEDICINE)	16
FAMILY MEDICINE	11
INTERNAL MEDICINE	25
CLINICAL NURSE SPECIALIST (PSYCHIATRIC/MENTAL HEALTH)	14
NURSE PRACTITIONER	12
Grand Total	475

Summary of Paid Claims

Provider Group	Claims
SANFORD MEDICAL CENTER FARGO PROF	264
ALTRU HEALTH SYSTEM PROFESSIONAL	122
NORTH CENTRAL HUMAN SERVICE CENTER	28
SANFORD CLINIC FARGO REGION	130
CENTER FOR PSYCHIATRIC CARE	59
NORTHWEST HUMAN SERVICE CENTER	13
SANFORD BISMARCK	145
NORTHLAND CHRISTIAN COUNSELING CENTER	21
WHITNEY SLEEP DIAGNOSTICS AND CONSULTANTS	23
ESSENTIA HEALTH	7
BILLINGS CLINIC	14
PSYCHIATRY NETWORKS	14
ST ALEXIUS CLINICS	10
BADLANDS HUMAN SERVICE CENTER	4
NORTHEAST HUMAN SERVICE CENTER	3
Grand Total	857

- Top 15 Providers represent 91% of total claim spend

Summary of Paid Claims

Diag 1	Diagnosis Description	Claims
N97.9	Female infertility, unspecified	35
N97.0	Female infertility associated with anovulation	36
628	Female Infertility	38
F41.1	Generalized anxiety disorder	24
F33.1	Major depressive disorder, recurrent, moderate	16
296.32	Major depressive disorder, recurrent, moderate	11
628.9	Infertility, female, of unspecified origin	21
F84.0	Autistic disorder	7
G47.33	Obstructive sleep apnea (adult) (pediatric)	18
314.01	Infertility, female, of other specified origin	10
311	Generalized anxiety disorder	9
F33.9	Obstructive sleep apnea (adult)(pediatric)	9
F90.2	Encounter for supervision of normal first pregnancy, first trimester	7
F32.1	Anxiety, dissociative and somatoform disorders	4
628.8	Attention-deficit hyperactivity disorder	10
Grand Total		255

These top 15 diagnoses represent 46% of total claims.

Questions?

Thank you for your time.